

Volunteering Application Form

| Please be advised that DCSN can only accept volunteers who are aged 18 years and above. Volunteers must also have a valid Emirates ID and Visa. Visit Visas will not be accepted. Thank you. | |
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| Name: | Date of Birth: |
| Address: | |
| Home Telephone Number: | |
| Occupation: | Email Address: |
| Emergency Contact Person & Telephone Number: | |
| | |
| Do you have any previous experience working with o | children with special needs? |
| If yes, what type of disability? | |
| | |
| Is there any area you are particularly interested in foc crafts. music, etc?) | ocusing your volunteer efforts, (swimming, arts, |
| Are there any skills or talents you may have that wo | ould be helpful to the Center, such as creative |
| writing or computer skills? | |
| | |
| Please list the days and times you are available and (Please note: the Center is open Mon-Thurs, from 8.30 am-2.00 | |
| | |

Please note: To enable you to volunteer at DCSN - as well as having completed the Volunteering Application Form, we also require a photocopy of your Emirates ID, Passport and Visa. Please email all documents to: information.english@dcsneeds.com Thank you



Today's Date: _____